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METROPOLITAN LIFE INSURANCE COMPANY

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Nineteen Thirty-seven a Star Health Year

NINETEEN THIRTY-SEVEN, despite a bad beginning, turned out to be the record health year of all time among the 17,700,000 Industrial policyholders of the Metropolitan Life Insurance Company —a group of people composed almost entirely of wage-earners and their dependents. The year established the new low mortality rate, for all causes of death combined, of 8.221 deaths per 1,000 insured lives, a decline of 2.1 percent from the figure registered for 1936.

A Year of Best Records

To appreciate fully the remarkable health record of the year just closed, it is necessary to consider in detail individual causes of death; for 1937 was featured by a whole series of new "best records." They follow:

Eight causes of death—namely, typhoid fever, scarlet fever, tuberculosis, chronic nephritis, diseases arising out of pregnancy and childbirth, homicides, accidental burns, and railroad accidents — registered the lowest mortality rates of all time in this insured group. In addition, the combined rate for all forms of accidental death, taken together, was lower than ever before.

Seven of the 12 months of last year—namely, May, June, July, August, September, November, and December — recorded the lowest death rates of all time for each of these individual months.

September, itself, registered *the lowest death rate for any month of any year in the history of the Company's insured wage-earning population.*

The average length of life, or expectation of life at birth of the Industrial policyholders, reached the new maximum of 60.7 years in 1937, an increase of a third of a year over last year's figure, and of almost exactly 14 years over the expectation of life (46.63 years) a quarter of a century ago.

Insured Lives Saved in Consequence of Lower Death Rates

The crude death rate in this vast body of insured wage-earners and their families was 35.8 percent* below that for 1911, the first year of the Metropolitan's series of comparable mortality records. In that year the death rate was 12.53 per 1,000.

*Weekly premium-paying policyholders aged one year and over.

If the same mortality had prevailed in 1937 there would have been 237,693 deaths of Industrial policyholders* instead of the 139,816 which were actually recorded. This is equivalent to a saving of about 98,000 lives in the single year 1937. Over the whole period beginning with 1911 the accumulated saving of lives is now 1,273,000. The death rate of the general population of the country has also shown a decided downward trend during this same period, but the decline has been greater among the industrial wage-earners. We believe that the welfare activities of the Company for its policyholders have contributed greatly to this result, although it is impossible to measure the exact extent to which these services have influenced the rate of mortality.

Mortality Rates by Age

A particularly gratifying feature of the 1937 mortality record is the continued drop in the death rate among children, adolescents, young adults—and, indeed, in all ranges up to age 65, beyond which the mortality rate in 1937 exceeded slightly that of 1936. When comparison is made with the facts for a quarter of a century ago it is seen that in early childhood the 1937 death rate was less than one quarter of that prevailing in 1911, and that in every age group up to 45 years the mortality has been cut to one half its original value, or less. The following table brings out these facts.

Death Rates per 100,000 for All Causes of Death. Total Persons, by Age Periods. Metropolitan Life Insurance Company, Industrial Department, Weekly Premium-Paying Business, 1911, 1936, and 1937

Ages	1937	1936	1911	Percent Decline 1937 Since 1911
1 and over.....	804.1	823.0	1,253.0	35.8
1 – 4.....	318.9	326.7	1,479.1	78.4
5 – 9.....	140.6	147.9	416.2	66.2
10 – 14.....	107.3	116.4	268.0	60.0
15 – 19.....	184.4	190.1	467.8	60.6
20 – 24.....	261.7	282.2	732.5	64.3
25 – 34.....	375.9	403.4	947.7	60.3
35 – 44.....	648.5	672.2	1,367.8	52.6
45 – 54.....	1,260.5	1,296.5	1,978.3	36.3
55 – 64.....	2,673.7	2,736.2	3,596.0	25.6
65 – 74.....	6,047.5	6,040.5	7,455.0	18.9
75 and over....	13,712.5	13,140.1	13,926.9	1.5

Individual Causes of Death

The foregoing are the major developments of the health record of 1937. There follows a discussion, in greater detail, of what happened both in the year just closed and over a period of years with respect to the mortality from the more important causes of death.

*Weekly premium-paying policyholders aged one year and over.

The Mortality from Tuberculosis Drops 5.5 Percent

Whatever may be transpiring throughout the general population of the United States, the long-time downward swing in the tuberculosis death rate is still going on among these millions of insured wage-earners and their families. The tuberculosis death rate for 1937 in the general population of the United States is not yet at hand, but provisional reports for 1936 indicate that there was perhaps a slight increase from the death rate in 1935, so that the decline to which we had become accustomed from year to year seemed to be at least temporarily arrested. Among the insured, on the other hand, the mortality from this disease continued to drop in 1936, by 2.7 percent below the 1935 figure, and the 1937 death rate (51.3 per 100,000) marks a further sizable drop of 5.5 percent. Over a period of a quarter of a century, the decline in the death rate from tuberculosis has been greater among the Industrial policyholders of the Metropolitan Life Insurance Company than in the general population of the country, and this holds true for both males and females, and for Negroes as well as for white persons. This means, in essence, that the very element of the population where the tuberculosis situation was formerly the most serious has benefited most from the movement against tuberculosis.

There is excellent prospect that the downward swing of the tuberculosis death rate will continue—more particularly as the movement against the disease becomes more and more effectively organized and administered. This movement is concentrating its resources where they will do the most good. Furthermore, we are having to deal every year with fewer foci for new infections, and there are, as a result, fewer new cases every year.

Thus far it is clear that the after-effects of the depression years have not had an unfavorable influence on the tuberculosis death rate in the American wage-earning population, the very group in which we would expect the cumulative effects of unemployment and the pinch of actual want to be reflected in a higher death rate from this disease.

Despite the great gains that have been made against tuberculosis, the fight for its control must go on. It must always be borne in mind that this disease is still an extremely important public health problem and that it even now ranks seventh among the leading causes of death and is responsible for about 70,000 deaths a year in the United States.

The drop in the tuberculosis death rate is probably the greatest single achievement in the entire history of the public health movement.

Typhoid Fever

In 1937, for the first time in the history of the Metropolitan Industrial policyholders, the death rate per 100,000 from typhoid fever dropped below unity. From the standpoint of percent reduction in the death rate as compared with a

quarter century ago, this disease holds the record, with a decline of 96 percent. It is nevertheless true that there are still States, and areas within States, where typhoid fever is anything but a negligible problem. Examples of this are New Mexico, which, as recently as 1936, registered a typhoid fever death rate of 8.5 per 100,000, and West Virginia, where the rate was 4.4 and where the disease was charged with 80 deaths in that year. A considerable number of rural counties, incorporated villages, and small cities under 10,000 population still have high mortalities from typhoid fever.

Principal Communicable Diseases of Childhood

The death rate for the four principal communicable diseases of childhood, combined, rose in 1937. This was due, for the most part, to an increase of 76.5 percent in the mortality from whooping cough, although measles and diphtheria, which had registered new minimal rates in 1936, were charged with small rises last year.

A comparison with the figures for 10 years ago shows a drop of 69.0 percent for the four diseases combined—75.6 percent for measles, 48.4 percent for scarlet fever, 53.1 percent for whooping cough, and 82.1 percent for diphtheria. The greatest interest still attaches to diphtheria, where the largest reduction in mortality has occurred. Despite the slight rise last year the diphtheria death rate has been cut in two in five years, reduced by more than 80 percent in 10 years, and by 93 percent since 1911. Diphtheria, like typhoid fever, is an example of what it is possible to accomplish in the control of a communicable disease once knowledge of the cause and the method of prevention have become available; but again, as in the case of typhoid, there are areas where diphtheria is still important as a cause of death. For example, it caused 135 deaths in the general population of West Virginia in 1936, corresponding to a death rate of 7.4 per 100,000. Death rates in excess of three per 100,000 were registered in that year in several States.

Influenza and Pneumonia

Early in 1937 there was widespread prevalence of influenza which was quickly reflected in sharp increases in mortality both for this disease and for pneumonia. At the end of the first quarter the year-to-date death rates for both diseases were higher than they had been for several years. By the end of April, however, the situation had improved materially, and at the close of 1937 the combined mortality from the two diseases was substantially the same as for 1936. Indeed, the death rate for pneumonia, considered separately, showed distinct improvement as compared with that for the previous year.

The drop in pneumonia mortality, despite the rise in deaths reported from influenza in 1937, is significant. Every year there are many thousands of cases of pneumonia in which influenza is not a factor. At the

present time serum therapy is the most effective weapon in the treatment of pneumonia. It has been estimated that if the serum treatment were applied in all cases of lobar pneumonia, the mortality throughout the country could be reduced by at least one half. How important a role the new treatment played in reducing the pneumonia death rate last year cannot be determined, as there is no record of the number of pneumonia cases among all Metropolitan Industrial policyholders or of cases which received the serum therapy treatment. One thing, however, is assured, namely, that as more and more pneumonia patients benefit by this recent advance in medical science, the pneumonia death rate will continue to decline—and decline materially.

Another New Minimum for Deaths Incidental to the Maternal State

The death rate from diseases arising out of pregnancy and childbirth has been dropping continuously among insured women over a long period of years. This rate was 15.5 per 100,000 in 1927; by 1937 it had fallen to 6.8, a new minimum which marked a drop of 56 percent in 10 years. While the decline has been due, in large part, to the falling birth rate, whereby women have been exposed with diminishing frequency to the risks of maternity, the fall in the puerperal death rate has been much greater than that in the birth rate. This means that a real decline has taken place in the hazards of the maternal state, among the wives of industrial wage-earners. There are indications that this is happening also among women throughout the country. These gains are the happy result of the intensive drive against the avoidable perils of the puerperal state through application of good prenatal and maternal services.

New Low for Chronic Nephritis

Chronic nephritis was another disease to register a new low mortality rate last year (54.6 per 100,000). This is essentially in continuation of a systematic downward trend in recent years.

Heart Disease

The crude death rate for heart disease, which ranks first among all the causes of death, dropped slightly in 1937. A bright spot in the heart disease mortality record is the fact that the rate is declining among young people where most of the deaths are caused by chronic endocarditis, which, in turn, is most often induced by infectious diseases, chiefly acute rheumatism, streptococcic infection, and syphilis. The trend is still upward for cardiac diseases of the senescent or arteriosclerotic type which are predominant in the higher age ranges of life and which are, for the most part, the result of the inevitable breakdown of the organism with advancing age.

Cancer Death Rate Shows Little Change Since 1936

The cancer death rate (which recorded a decline in 1936 for the

first time in many years) was substantially unchanged in 1937. The crude death rate from cancer has increased 38 percent since 1911; but the crude rate is a grossly inaccurate measure of the actual rise in cancer mortality. When due allowance is made for shifts in the age distribution of the policyholders and account is taken of the continually improving diagnosis of internal cancers, it is apparent that these factors are responsible for a very large part, if not the whole, of the increase in the crude death rate.

However this may be, cancer stands today second in numerical importance among all the causes of death, both among the insured wage-earners and in the general population of the country.

Diabetes Mortality Sets New High Record

The crude death rate for diabetes continues its slow but persistent rise. It was 25.0 per 100,000 in 1937, and this is a new maximum. There are, however, definitely encouraging aspects of the diabetes situation. Diabetics are living longer today than ever before. The death rate is declining among persons under 45 years of age. Even at the older ages, where the great majority of the deaths occur, the rise in the mortality rate is now very slight. During the past year the value of the new protamine insulin has been definitely proved, and the spread of the use of this improved type of insulin promises to add still further to the longevity of diabetics.

Alcoholism Death Rate at Lowest Point Since 1921

The alcoholism death rate, always a negligible item among Metropolitan Industrial policyholders, declined from 2.2 per 100,000 in 1936 to 1.8 in 1937. This is the lowest rate for this disease in 16 years, and the actual number of deaths reported last year as due to alcoholism was only 323 in a group of 17,700,000 people.

Deaths from Violence

Suicides and Homicides

The suicide death rate declined in 1937, continuing the drop which has now been in evidence for five successive years. The death rate was 8.8 per 100,000, which marks a drop of 17 percent since 1932 when the highest suicide rate in 20 years was recorded.

The homicide death rate declined from 5.0 per 100,000 in 1936 to 4.7 in 1937—a new all-time minimum.

Accidents

The 1937 death rate for accidents (all forms) was at the remarkably low figure of 53.6 per 100,000, the lowest on record for any year in the history of this large cross-section of the population. The drop as compared with 1936 was 7 percent. It should be noted that despite the much increased number of wage-earners employed (and thus exposed to the hazards of industry) as com-

METROPOLITAN LIFE INSURANCE COMPANY

Crude Death Rates per 100,000 for Principal Causes. All Ages.

WEEKLY PREMIUM-PAYING BUSINESS IN INDUSTRIAL DEPARTMENT. 1911 AND 1927 TO 1937.

CAUSES OF DEATH	1937*	1936	1935	1934	1933	1932	1931	1930	1929	1928	1927	1911†
ALL CAUSES OF DEATH	822.1	839.8	837.6	854.1	860.0	856.9	877.1	873.5	934.2	916.6	887.9	1,253.0
Typhoid fever	.9	1.0	1.1	1.5	1.6	1.7	2.4	2.4	2.4	2.7	4.6	22.8
Communicable diseases of childhood	7.5	6.5	10.0	11.1	9.0	11.4	14.5	15.6	20.2	23.3	24.2	58.9
Measles	1.0	.9	2.5	2.7	1.5	1.7	3.2	2.9	3.0	5.2	4.1	11.4
Scarlet fever	1.6	2.1	2.6	2.6	2.6	2.8	3.2	2.5	2.7	2.7	3.1	13.1
Whooping cough	3.0	1.7	2.7	3.7	2.3	3.0	3.6	4.3	5.7	5.7	6.4	7.1
Diphtheria	1.9	1.8	2.2	2.1	2.6	3.9	4.5	5.9	8.8	9.7	10.6	27.3
Influenza and pneumonia	84.3	84.5	80.8	76.4	82.8	84.5	94.8	90.5	130.5	114.1	95.5	131.1
Influenza	18.0	14.7	14.7	11.4	20.3	19.1	21.1	14.8	41.9	24.8	17.8	15.9¶
Pneumonia	66.3	69.8	66.1	65.0	62.5	65.4	73.7	75.7	88.6	89.3	77.7	115.2¶
Tuberculosis—all forms	51.3	54.3	55.8	59.4	64.7	69.8	76.2	80.9	86.9	90.1	93.6	224.6
Tuberculosis of respiratory system	46.0	48.5	49.8	52.2	57.8	61.8	67.2	70.4	76.7	78.8	81.9	203.0
Syphilis, locomotor ataxia, and general paralysis of the insane	11.1	11.7	11.5	12.3	11.4	11.9	11.6	11.4	12.6	12.7	13.2	11.0
Cancer—all forms	94.1	93.9	96.1	96.1	94.6	91.1	84.1	78.2	77.6	75.7	74.3	68.0
Diabetes mellitus	25.0	24.7	24.4	24.4	24.1	23.0	21.1	18.4	18.3	17.6	16.8	13.3
Alcoholism	1.8	2.2	2.1	2.3	2.2	2.4	2.9	3.1	3.4	3.3	3.4	4.0
Cerebral hemorrhage, apoplexy‡	59.0	61.9	61.2	63.2	63.8	62.1	60.4	60.4	58.0	56.7	55.1	64.2
Diseases of heart§	157.0	161.0	158.1	162.9	161.5	155.5	147.9	144.9	146.8	142.2	132.5	141.8
Diseases of the coronary arteries	30.1	25.4	22.7	18.8	13.5	9.4	7.0	4.7	**	**	**	**
Angina pectoris	7.7	8.6	9.3	10.0	10.8	10.7	10.0	9.4	9.1	9.2	8.4	3.9
Diarrhea and enteritis	8.8	8.5	8.1	11.1	10.6	11.2	15.7	20.4	20.8	24.0	24.6	27.9
(under 2 years)	6.6	6.1	5.8	8.1	7.5	8.1	12.2	15.5	16.2	19.5	20.1	13.0
Appendicitis	11.0	11.4	11.4	13.1	13.2	13.2	14.1	14.1	14.0	13.4	13.8	10.9
Chronic nephritis (Bright's disease)	54.6	59.4	60.2	64.9	67.1	68.7	67.0	68.1	69.4	70.5	69.5	95.0
Puerperal state—total	6.8	7.7	8.7	8.8	9.4	10.5	11.7	12.1	13.6	13.9	15.5	19.8
Total external causes	67.1	71.5	69.6	73.2	71.9	71.5	77.6	79.0	80.3	77.6	79.5	97.9
Suicides	8.8	8.9	9.2	9.5	10.0	10.6	10.0	9.8	8.5	8.3	8.3	13.3
Homicides	4.7	5.0	5.9	5.9	6.3	6.1	7.0	6.7	6.6	6.7	7.3	7.2
Accidents—total	53.6	57.7	54.5	57.8	55.6	54.8	60.6	62.5	65.2	62.6	63.9	77.4
Accidental burns	2.7	3.1	3.2	3.6	3.3	3.7	3.8	4.6	5.0	5.4	5.3	8.8
Accidental drowning	5.4	4.8	4.9	5.3	6.1	5.9	6.4	6.2	6.4	7.0	6.7	10.2
Accidental traumatism by fall	10.3	11.3	11.4	11.1	10.6	10.1	10.0	9.6	9.0	8.0	8.5	13.2
Accidental traumatism by machines	1.0	1.1	.9	.8	.8	.8	1.0	1.2	1.6	1.2	1.3	1.8
Railroad accidents	2.3	2.8	2.6	2.6	2.8	2.7	2.7	3.0	3.9	3.8	4.0	9.5
Automobile accidents	20.9	20.1	20.3	21.1	19.8	18.9	22.0	20.9	21.0	18.4	18.4	2.3
All other accidents	11.0	14.4	11.2	13.3	12.2	12.7	14.7	17.0	18.3	18.8	19.7	31.6
Other diseases and conditions	143.8	145.6	146.5	144.6	147.8	148.3	158.1	159.9	170.3	169.6	163.4	257.9

*All 1937 death rates are subject to slight correction, since they are based on provisional estimates of lives exposed to risk.

†Ages 1 and over only.

‡Rates for 1930 to 1937 are not strictly comparable with those for other years, owing to changes in classification procedure.

§Excluding pericarditis, acute endocarditis, acute myocarditis, and angina pectoris.

**Included in all other diseases and conditions prior to 1930.

¶Not comparable with the rates for 1927 to 1937.

pared with the worst years of the depression, there was a material drop in fatal accidents.

Two specific types of accidental death, namely, burns and railroad accidents, registered new minimal rates in 1937. For burns and railroad accidents the 1937 figures were less than one third and less than one fourth, respectively, of those recorded a quarter of a century ago.

Automobile Fatalities

A rise of 4 percent was recorded for automobile fatalities as compared with 1936. The high point for the Metropolitan Industrial policyholders was reached in 1931, when the rate was 22.0. Throughout the general population of the United States, according to estimates from reliable sources, there were about 40,000 motor vehicle fatalities during the year. If these estimates are confirmed later by official figures, 1937 will register a higher automobile accident death rate than ever before recorded in the United States.

Divorce and Duration of Marriage

IN THE United States the first five years of married life are the hardest, if we may judge by the high proportion of divorces that take place within that short period, namely 35.7 percent of all divorces. After the first five years, each successive five years bring a continually diminishing number, namely 29.1 percent 5 to 10 years after marriage; 16.6 percent 10 to 15 years after marriage; 8.5 percent 15 to 20 years; and only 10.1 percent in all the remaining years of married life. Out of a group of 15 leading nations, as shown in the accompanying table, only Bulgaria shows a higher percentage of divorces than ours in the first five years of marriage, namely 65.8 percent. This figure, though excessively high, is of minor interest, because the total number of divorces in Bulgaria is relatively insignificant. Switzerland also ranks very high, although the figure 37.6, shown for the percentage of early divorces, relates in this case to the first six instead of the first five years, because of the method of tabulation used by the Swiss official report.

While the United States ranks second, among the nations listed, as regards the proportion of divorces occurring within five years of marriage, it is easily first as regards the ratio of total divorces to marriages. Our score is 164 per 1,000, exceeding by a long lead the next in order, Austria, with 107 per 1,000. Switzerland comes third with 99 per 1,000. The distinction of showing the lowest figure in the list falls to England and Wales, with 12 per 1,000. The position occupied by the various countries in this list giving the ratio of divorces to marriages depends undoubtedly on a variety of circumstances. Probably the most potent factor is the character of the prevailing divorce laws. In the United States not only have we great liberty in this respect but the variation of

conditions laid down in the several States, taken together with the fact that a divorce granted in one State is, in most cases, valid in other States of the Union, undoubtedly is the main reason for our position of uncontested first in the list. Aside from categorical prescriptions of the law, general popular opinion, with or without the influence of religious sentiment and organization, undoubtedly strongly influences the figures. It is no doubt in response to such influence that Portugal and Spain are among the countries showing minimum proportions of divorces

Percent Distribution of Divorces by Duration of Marriage; Marriage Rates, and Divorce Rates per 1,000 of Population; and Ratio of Divorces to 1,000 Marriages, in the United States and Certain Foreign Countries

Countries	Date	Percent Distribution of Divorces by Years' Duration of Marriage					Rates per 1,000 Population		Divorces per 1,000 Marriages
		Under 5	5 to 9	10 to 14	15 to 19	20 and Over	Marriage	Divorce	
United States	1932	35.7	29.1	16.6	8.5	10.1	10.4[g]	1.71[g]	164[g]
Austria	1935	27.5	27.8	22.9	11.6	10.2	6.7	.72	107
Belgium	1935	9.5	32.2	30.4	14.2	13.7	7.6	.31	41
Bulgaria	1934	65.8	18.8	9.3	3.7	2.4	9.3	.25	27
England and Wales[a]	1935	12.2	32.8	41.0		14.0	8.6	.10	12
France	1935	18.3	33.2	27.2	11.8	9.5	6.8	.50	74
Germany	1935	26.1	31.0	19.6	14.4[d]	8.9[d]	9.7	.75	77
Hungary[b]	1935	32.6	32.2	20.0	8.5	6.7	8.5	.63	74
Netherlands	1935	26.2	29.5	20.5	11.5	12.3	7.2	.35	49
New Zealand[c]	1935	10.9	30.7	22.5	16.5	19.4	8.2	.44	54
Norway	1935	17.5[e]	26.7[e]	23.3[e]	15.2[e]	17.3[e]	7.1	.31	44
Portugal	1935	15.3	26.7	25.9	15.0	17.1	6.8	.13	19
Spain[b]	1932-33	29.3[e]	35.1[e]	26.7[e]	7.9[e]	1.0[e]	6.5	.15	23
Sweden	1931-35	20.3	27.6	20.9	12.7	18.5	7.3	.41	56
Switzerland	1935	37.6[f]	21.6[f]	28.6[f]		12.2[f]	7.3	.72	99

(a) Percentages based on petitions filed in principal registry in London.
(b) Percentages based on divorces and separations.
(c) Percentages based on petitions.
(d) These data relate to durations of 15 to 21 years and of 22 years and over respectively.
(e) These data relate, respectively, to durations of under 6 years, 6 to 10 years, 11 to 15 years, 16 to 20 years, and 21 years and over.
(f) These data relate, respectively, to durations of under 6 years, 6 to 9 years, 10 to 19 years, and 20 years and over.
(g) These figures relate to the year 1935.
The marriage and divorce rates in 1932, in the United States, were much below normal on account of the economic depression.

per thousand marriages. France and Germany, with 74 per 1,000 and 77 per 1,000, represent approximately average conditions in this respect. As for Bulgaria, which, as noted before, has an excessively high proportion of divorces in the first five years of married life, its divorce rate per thousand marriages is comparatively low, namely 27 per 1,000. Its very high proportion of early divorces seems to be something of a statistical curiosity, for which persons familiar with local conditions possibly may have an explanation.

The eighth column in the table shows also the marriage rates of the several countries enumerated. While such rates are not directly comparable, owing to variations in the age distribution of the population, it is interesting to note that in this column also the United States has the highest figure of all, with Germany second.

For divorces in marriages of relatively long duration, New Zealand leads in the list. Almost one-fifth of the divorces in that Dominion take place after 20 or more years of marriage. In Sweden and Norway also that proportion is approached. The opposite extreme is found in Spain, where, of the relatively small total number of divorces, only 1 percent takes place among couples married for such a long period of years.

From the figures here collected by way of example for 15 countries, it is evident that there is wide variety in the attitude of the different nations towards divorce, both as regards its total frequency and as regards the relative proportion of divorces in marriages of longer or shorter duration.

For us in the United States, where the problem of families broken by divorce is most acute, a special interest attaches to a study of such statistics as have here been outlined. Divorce at any time is a bad way out of an unfortunate situation. Must we deplore particularly our position so near the head of the list as regards the proportion of divorces after a short married period? Probably not, for these marriages disrupted after short duration will often be the childless ones, or at least will not involve the breaking up of a family with several children.

Health Record for December 1937

DECEMBER 1937, like six of the 11 preceding months of that year, registered the lowest death rate ever recorded for the corresponding month of any year, namely, 7.4 per 1,000. This figure, in fact, has never been even closely approached among Metropolitan Industrial policyholders in the closing month of any previous year. The record December low, prior to 1937, was 8.0 per 1,000.

Reports for the general population of 86 large cities showed that the excellent health conditions which had prevailed during the summer and autumn continued up to the end of the year.

The following table shows the mortality among Industrial policyholders for December 1937, November 1937, and December 1936, together with the death rates for the years 1937 and 1936.

METROPOLITAN LIFE INSURANCE COMPANY

Death Rate per 100,000 for Principal Causes. Weekly Premium-Paying Business in Industrial Department. All Ages (Annual Basis)*

MONTHS OF DECEMBER 1937, NOVEMBER 1937, AND DECEMBER 1936.

CAUSES OF DEATH	ANNUAL RATE PER 100,000 LIVES EXPOSED*				
	December 1937	November 1937	December 1936	YEAR	
				1937	1936
TOTAL—ALL CAUSES	744.8	770.7	798.0	822.1	839.8
Typhoid fever	.9	1.4	.9	.9	1.0
Measles	.7	.6	.3	1.0	.9
Scarlet fever	1.4	1.2	2.2	1.6	2.1
Whooping cough	1.6	2.1	2.3	3.0	1.7
Diphtheria	2.8	4.3	2.3	1.9	1.8
Influenza	9.7	6.7	12.7	18.0	14.7
Tuberculosis (all forms)	41.1	45.0	46.6	51.3	54.3
Tuberculosis of respiratory system	37.3	39.7	42.7	46.0	48.5
Syphilis, locomotor ataxia, and general paralysis of the insane	10.4	10.9	9.5	11.1	11.7
Cancer (all forms)	86.5	94.4	93.0	94.1	93.9
Diabetes mellitus	22.6	21.0	22.7	25.0	24.7
Cerebral hemorrhage; apoplexy	58.4	58.4	58.4	59.0	61.9
Diseases of the heart†	141.3	147.8	151.4	157.0	161.0
Diseases of the coronary arteries	28.1	30.8	26.3	30.1	25.4
Angina pectoris	6.5	7.4	8.3	7.7	8.6
Pneumonia (all forms)	61.5	48.5	69.9	66.3	69.8
Diarrhea and enteritis	5.5	6.7	6.3	8.8	8.5
Appendicitis	8.2	10.1	9.3	11.0	11.4
Chronic nephritis (Bright's disease)	48.9	49.1	53.6	54.6	59.4
Puerperal state—total	5.6	5.3	6.4	6.8	7.7
Suicides	6.6	8.1	6.8	8.8	8.9
Homicides	3.8	3.8	4.9	4.7	5.0
Accidents—total	49.8	52.8	55.2	53.6	57.7
Automobile accidents	19.2	23.8	22.6	20.9	20.1
All other diseases and conditions	142.8	154.3	148.8	145.7	147.6

*The rates for 1937 are subject to slight correction, since they are based on provisional estimates of lives exposed to risk.

†Excludes pericarditis, acute endocarditis, acute myocarditis, and angina pectoris.

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STATISTICAL BULLETIN,
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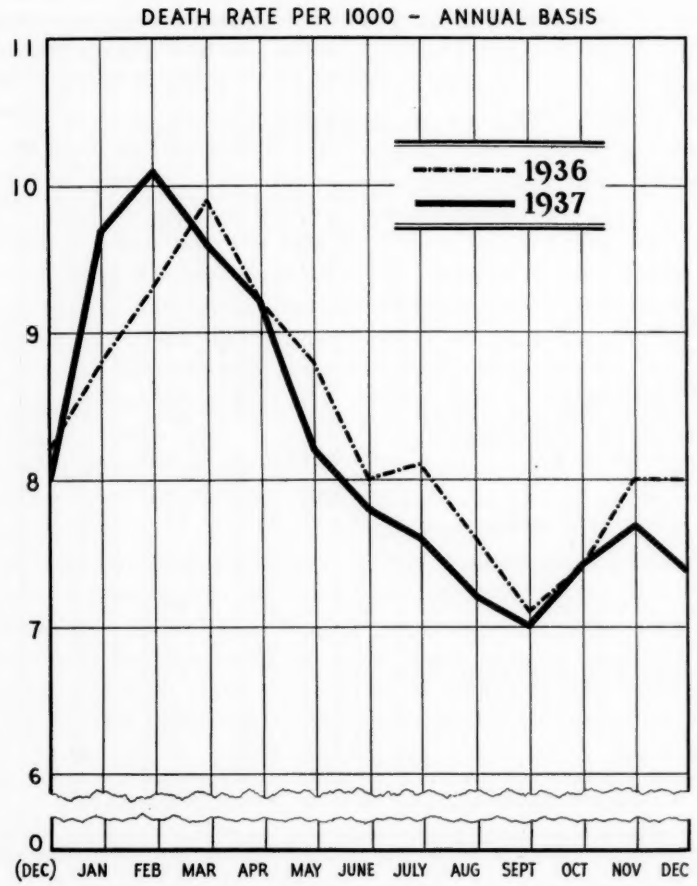
DEATH RATES FROM ALL CAUSES

METROPOLITAN LIFE INSURANCE CO. – INDUSTRIAL DEP'T.
WEEKLY PREMIUM-PAYING BUSINESS – TOTAL PERSONS



	(DEC)	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
1936	8.8	9.3	9.9	9.2	8.8	8.0	8.1	7.6	7.1	7.4	8.0	8.0
1937	9.7	10.1	9.6	9.2	8.2	7.8	7.6	7.2	7.0	7.4	7.7	7.4

Rates are provisional for 1937

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